Claims:

1. The use of tibolone for the manufacture of a medicine in the treatment of estrogen-deficiency related complaints in females that exhibit these complaints while they are on treatment with a drug which prevents the synthesis of endogenous estrogen, particularly estradiol.

2. A use according to claim 1, characterized in that the estrogen-deficiency related complaints comprise climacteric complaints.

3. A use according to claim 1 or 2, characterized in that the estrogen-deficiency related complaints comprise bone loss.

4. A use according to any one of the preceding claims, characterized in that the drug which prevents the synthesis of endogenous estrogen is an aromatase inhibitor.

5. A use according to any one of the preceding claims, characterized in that the aromatase inhibitor is selected from the group consisting of aminogluthethimide, anastrozole, letrozole, exemestane, and formestane.

6. A use according to any one of the preceding claims, characterized in that tibolone is administered in a daily dosage of 0.4 to 2.5 mg.

7. A method of treatment of estrogen-deficiency related complaints in female patients that exhibit these complaints while they are on treatment with a drug which prevents the synthesis of endogenous estrogen, wherein the treatment comprises the administration to said patients of an effective amount of tibolone.

8. The method of claim 7, wherein the estrogen-deficiency related complaints comprise climacteric complaints.

9. The method of claim 7 or 8, wherein the estrogen-deficiency related complaints comprise bone loss.

10. The method of any one of claims 7-9, wherein the drug which prevents the synthesis of endogenous estrogen is an aromatase inhibitor. The method of any one of the claims 7-10, wherein the aromatase inhibitor is selected from the group consisting of aminogluthethimide, anastrozole, letrozole, exemestane, and formestane.

11. The method of any one of the claims 7-11, wherein tibolone is administered in a daily dosage of 0.4 to 2.5 mg.